

# ANNUAL REPORT

## School Year 2017-18



## MISSION AND VISION

The New Orleans Therapeutic Day Program (NOTDP) is a partnership among the Recovery School District, Orleans Parish School Board, and Tulane University Medical School's Department of Child and Adolescent Psychiatry. NOTDP is a trauma-informed separate setting serving RSD and OPSB students in grades K-8 with the most severe diagnosed behavioral health disabilities whose needs cannot be met in a traditional school. We work with students to build the skills necessary to be successful in a less restrictive, school setting so they can one day transition back to their home schools. Ultimately, we aim to make sure all children with behavioral health needs have access to the appropriate services and placements.

NOTDP pursues this work with our long-term vision in mind. That is, by the year 2035, a full continuum of effective mental and behavioral health supports and interventions exists for children and adolescents in the Greater New Orleans region, ranging from evidence-based and trauma-informed school experiences to adequate hospital-based services.

## WHY?

Studies suggest that approximately 60 percent of children in New Orleans suffer from Post-Traumatic Stress Disorder, and New Orleans children are 4.5 times as likely as their peers nationwide to demonstrate signs of Serious Emotional Disturbance.<sup>1</sup> A 2012 report by the New Orleans Health Department finds that the behavioral health "system has failed to function as a comprehensive system that includes promotion, prevention, early identification, and treatment."<sup>2</sup> A recent study by the Institute of Women and Ethnic Studies found that young people in New Orleans report depression at two times the national rate; in addition, 51 percent of the young people surveyed reported they worry about violence, and 54 percent reported experiencing the murder of someone close to them.<sup>3</sup>

Despite this mental health landscape, few behavioral or mental health supports exist in our community. Although approximately 10 percent of students with behavioral disabilities are served outside of typical school settings nationwide, just .4 percent of students in Louisiana are served in alternative settings, highlighting the absence of appropriate placement and intervention options.<sup>4</sup> Children with mental health needs receive services either at their school or through a community-based provider; in crisis situations, young people may be hospitalized in a psychiatric residential treatment facility. Little exists between these extremes. To date, NOTDP is the only out-of-school therapeutic setting of its kind in Louisiana.

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<sup>1</sup> Children's Health Fund and Columbia University Mailman School of Public Health. Legacy of Katrina: The Impact of a Flawed Recovery on Vulnerable Children of the Gulf Coast, A Five-Year Status Report. Retrieved June 6, 2016, from <http://www.childrenshealthfund.org/sites/default/files/files/Five-Years-After-Katrina-Web.pdf>.

<sup>2</sup> New Orleans Health Department. Behavioral Health in New Orleans: Recommendations for Systems Change. Retrieved June 6, 2016 from <http://www.nola.gov/nola/media/Health-Department/Publications/Behavioral-Health-in-New-Orleans-2012-final-draft.pdf>.

<sup>3</sup> Institute of Women and Ethnic Studies. In that Number study. Retrieved July 3, 2017, from <http://inthatnumber-iwes.org/statistics>.

<sup>4</sup> Calculated from data drawn from the 38<sup>th</sup> Annual Report to Congress and United States Department of Education, <https://www2.ed.gov/programs/osepidea/618-data/static-tables/index.html>.

## 2017-18 HIGHLIGHTS

### Enrollment & Referrals

In our three years of service to children and families, NOTDP has served a total of **45 unique students**.

During the 2017-18 school year, we received **27 referrals**, consistent with previous years' numbers. We served **29 unique students** and had an acceptance rate of 74%.

We added a second program site, doubling the number of children we can serve on-site.

**"NOTDP Team- extremely thankful that you exist and have been supporting our students so well over the past few years. [Student] had a remarkable turnaround and is off to high school ready to knock it out from day one. Wouldn't have been possible without your program."**

*Niloy Gangopadhyay  
School Leader, Success Prep Academy*

### Academic Progress

Academic progress is routinely tracked and assessed. Small class sizes and individualized instruction have contributed to impressive academic growth among children who typically arrive at NOTDP three grade levels behind in math and reading. Our academic goal states that, Children enrolled at the Center for Resilience will make one year of academic progress in reading and math for every year they are enrolled in the program (or a portion thereof; progress is measured in grade level growth and commensurate with time in the program).

	2017-18 Outcome	2017-18 Goal
Reading	0.87 year growth (7 students grew more than 1 year)	1 year growth
Math	0.75 year growth (11 students grew more than 1 year)	1 year growth

Although we fell short of our goals, this average growth represents far more academic progress than children were able to make in their sending school setting.

### Transition to Home Schools

At the end of NOTDP's first year of operation, just one student transitioned back to his home school. By the end of the 2016-17 school year, six students had transitioned back to their home schools. At the close of this academic year, **4 students** transitioned to their home schools. The average length of stay for a child at NOTDP from enrollment to transition is **15.8 months**. This number has decreased incrementally each year of operation as we refine our program model. We expect this number to continue to decrease. We have an **83 percent** success rate in transitioning children back to their home schools, which exceeds our target of 80 percent by three percentage points.

## Other Quality Indicators

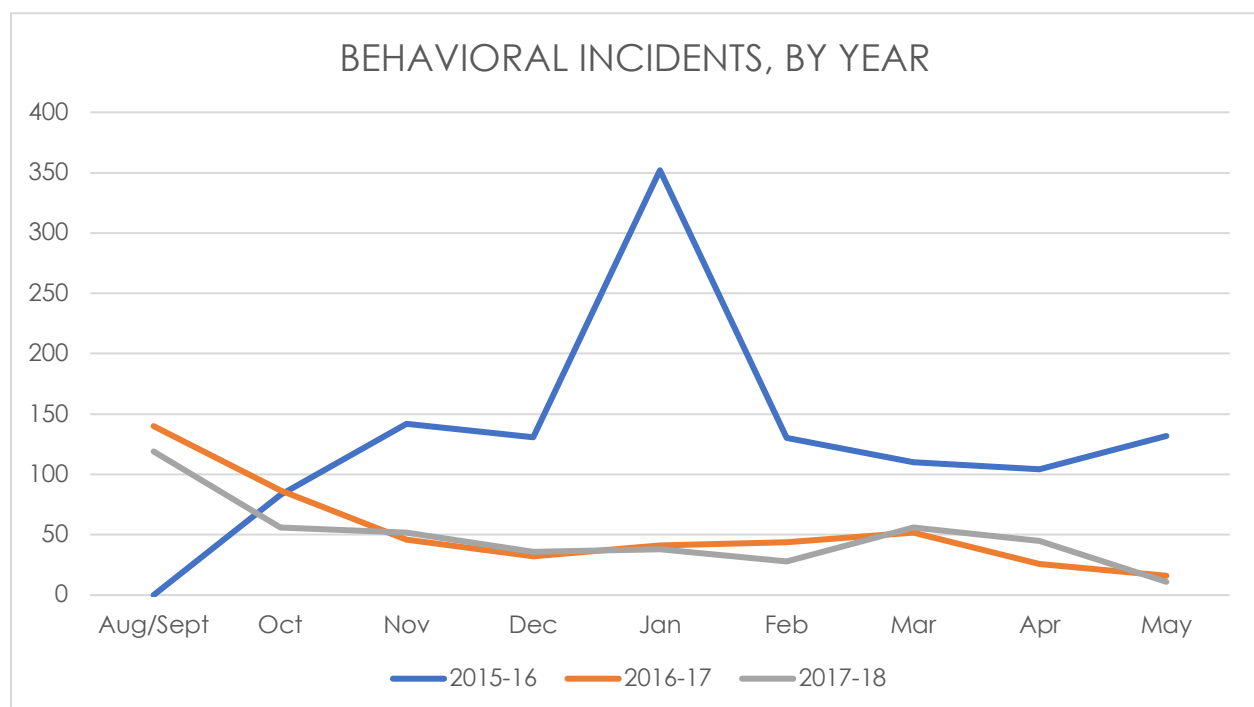
### Attendance

Average Annual Attendance		
2017-18	2016-17	2015-16
80.35%	89.5%	81%

The 2017-18 school year showed our lowest attendance rate to date. We do believe this is due in part to the small number of children we serve, and the fact that we had two siblings who demonstrated significant truancy issues, skewing the data negatively. We have worked closely with the Youth Opportunity Center to ensure adequate support and case management for chronic truancy issues and have been able to capitalize on our Family Liaison to provide additional family support. We will continue to monitor this data on a monthly basis.

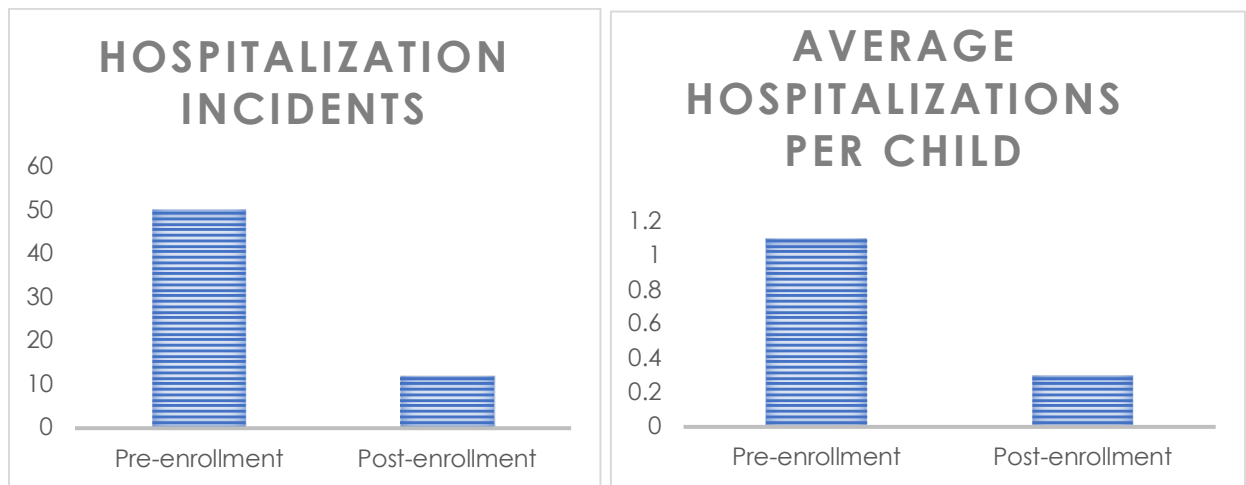
### Behavioral Incidents

The following chart shows year-to-year trends in behavioral incidents warranting staff intervention. The difference between our first and second year of programming is significant; we attribute the change to the implementation of Therapeutic Crisis Intervention in Schools as our crisis prevention and response method, as well as our staff's increased ability to anticipate and prevent behavioral issues. The general stability in our second and third year is notable, because our program expanded to a second program site in 2017-18 and we might have expected to see a resulting increase in behavioral incidents as the team worked to stabilize. We interpret these comparable trendlines as a reflection of the consistency of implementation of our program model and practices.



### Hospitalization Rates, Pre- and Post-Enrollment at NOTDP

Over time, we have seen a 75 percent reduction in incidents of psychiatric hospitalizations (including both short-term acute care stays, and referrals to longer-term psychiatric residential treatment facilities). To date, 50 percent of admitted children have experienced at least one hospitalization prior to referral; just 20 percent of enrolled children experience a hospitalization during time.



## EXPANSION

Not all children with severe mental and/or behavioral health needs require the same intervention. In 2017-18, we expanded to a second site at Children's Hospital to serve our children with the most intensive behavioral health needs. This expansion allowed us to provide services to accept referred children who were previously evaluated as too severe for our NOCCA setting.

### 2017-18 Program Models

	<b>Therapeutic Day School</b>	<b>Day Treatment Program</b>	<b>Homebound Services</b>
<b>Location</b>	New Orleans Creative Center for the Arts (NOCCA)	Children's Hospital	Home/Community Setting (Short Term)
<b>Capacity</b>	20	12	6
<b>Child Profile</b>	<ul style="list-style-type: none"> <li>Children with moderate behavioral and mental health needs</li> <li>Children in need of small-group instruction and able to focus on instructional tasks for at least 15 minutes at a time</li> </ul>	<ul style="list-style-type: none"> <li>Children with moderate to severe behavioral and mental health needs</li> <li>Children unable to persist on academic tasks for any sustained period of time</li> </ul>	<ul style="list-style-type: none"> <li>Children whose needs cannot be addressed in a day school or program setting</li> <li>Children transitioning into NOTDP building relationships before receiving services on-site</li> <li>Children transitioning from residential placement to NOTDP building relationships before receiving services on-site</li> </ul>
<b>Program Model</b>	50% Instruction / 50% therapeutic activities	20% Instruction / 80% therapeutic activities	4 hours of instruction / 90 minutes of therapy per week

We have two significant takeaways from this expansion that informed our program planning for the 2018-19 school year:

1. *Our distinction between moderate and intensive behavioral health needs is somewhat arbitrary.* In a city with so many gaps in mental health programming, we continue to field referrals for children with significant needs. We find that the profile of child referred to NOTDP does not differ greatly in intensity and, although we one day hope to differentiate between a less intensive therapeutic day program and more clinical day treatment program, currently a day treatment model is most appropriate for the majority of children we serve. Therefore, in school year 2018-19, we will use our two campuses to divide our program between elementary (K-5) and middle school (5-8) aged students.
2. Redesigning our daily schedule and how we use the program space led to a significant decrease in behavioral incidents. In the 2017-18 school year, we piloted a new schedule at the Children's Hospital site, in which children had a neutral "home base" where they eat breakfast and lunch, and which functioned as their default space. They left these recreation rooms to go to counseling, one-on-one instruction, and activities such as therapeutic recreation, but they could also opt out of

participation. Previously, the classroom had been the default space. In this new model, children saw a teacher for 30-minute instructional blocks, one-on-one, and received additional computer-based assignments to complete in the recreation room.

Therefore, our proposed model for 2018-19 looks like the following:

### **2018-19 Program Models**

	<b>Elementary (K-5) Day Treatment Program</b>	<b>Middle School (5-8) Day Treatment Program</b>	<b>Homebound Services</b>
<b>Location</b>	Children's Hospital	New Orleans Center for the Creative Arts (NOCCA)	Home/Community Setting <i>(Short Term)</i>
<b>Capacity</b>	20	12	6
<b>Child Profile</b>	Children with moderate to significant behavioral and mental health needs who qualify for special education services		<ul style="list-style-type: none"> <li>• Children whose needs cannot be addressed in a day school or program setting</li> <li>• Children transitioning into NOTDP building relationships before receiving services on-site</li> <li>• Children transitioning from residential placement to NOTDP building relationships before receiving services on-site</li> </ul>
<b>Program Model</b>	Varies based on student need Minimum 60 min. of direct instruction daily + 60 min. of computer-based intervention Minimum 105 min. of direct therapeutic support daily		4 hours of instruction / 90 minutes of therapy per week

# FINANCIALS

## Revenues

Revenue Source	2017-18	2018-19 (NOTDP)	2018-19 (Center for Resilience)
City Education Dollars	\$1,012,500.00	\$0	\$1,300,000.00
Sending School Fees	\$624,015.00	\$328,960.00	\$668,915.00
Grants	\$406,000.00	\$0	\$500,000.00
Medicaid			\$100,000.00
Reserve	\$1,100,000.00	\$899,000.00*	\$0
TOTAL	\$3,142,515.00	\$1,227,960.00	\$2,568,915.00

\*The Department of Education is requiring NOTDP to spend down this reserve prior to our transition to the non-profit Center for Resilience.

## Expenses

Expenses	2017-18	2018-19 (Projected)
Human Resources	\$1,820,490.00	\$2,095,000.00
Programming	\$539,108.00	\$519,824.00
Operations	\$701,208.00	\$990,573.52
TOTAL	\$3,060,806.00	\$3,605,397.52

## Donor List

Thank you to the following individuals and entities for their support of NOTDP during the 2017-18 school year:



**Booth Bricker Fund**



## PROGRESS: LOOKING FORWARD

NOTDP has identified expansion, facility, and non-profit transition as three major priorities for 2019-2020.

### Expansion

NOTDP's ambitious expansion plan will focus on planning efforts in the 2018-2019 School Year. Specifically, as we set our sights on launching a high school in 2019-2020, the upcoming year will include hiring an upper school director and developing age-appropriate academic and therapeutic service plans. Additionally, this year we look forward to expanding our services to include children outside of Orleans Parish. Finally, we hope to begin a two-year planning process resulting in a therapeutic group home. Detailed below is the timeline by which we will expand our services to include children of all ages and across a wider span of needs:

2017	2018	2019	2020	2021
Opened second site: operate Therapeutic Day School & Therapeutic Day Treatment Program	Transition to non-profit Center for Resilience	Add 9 <sup>th</sup> grade/HS pilot program	Add 10 <sup>th</sup> -12 <sup>th</sup> grades	
	Expand to serve children from surrounding parishes (December)		Launch group home	Launch trauma-informed early learning center
	Add HS Director for planning purposes		Add Early Learning Director for planning year	
	Add Group Home Director for planning purposes			

### Facility

We are committed to finding a more permanent home that meets the needs of the youth we serve. Facility priorities include:

- Adequate space for physical activity
- Ample office space or other small rooms for counseling sessions
- Resilient construction (plaster or brick walls; high ceilings; limited glass)

### Non-profit transition

Perhaps our most significant undertaking in 2018-2019, NOTDP will transition from a state-operated program to a stand-alone non-profit entity. The transition is currently projected to be effective by December, 2018. Priorities for ensuring a smooth transition include:

- Ensure 100% of state fund balance is either expended prior to transition
- Seamlessly transition existing staff from state payroll and benefits programs to non-profit payroll and benefits
- Ensure adequate start-up funding for non-profit and develop sustainable long-term budgets for the non-profit
- Begin partnerships with surrounding parishes to increase referrals